

prioritized list of inmates to be seen by the psychiatrist/nurse practitioner. The list will include a description of the patient or staff needs, i.e.: Mr. C is showing signs of rapid decompensation or Mr. C is complaining of intolerable side effects after a recent medication change.

4. Inmates who are in the Infirmary for psychiatric observation are a high priority and will be placed on the top of the *Psychiatric Service Needs List*. Mental health clinicians that admit an inmate to the Infirmary for psychiatric observation will be assigned to the inmate's care throughout their Infirmary stay. If there is a request for psychiatric services to see this inmate, this clinician will be available to discuss the inmate's condition and share insights and recommendations. If the clinician is unable to meet with the psychiatrist/nurse practitioner due to unavoidable circumstances, he/she will give a report to a peer and request that a peer represents him/her when meeting with the psychiatrist/nurse practitioner.
- B. Daily Emergency Coverage:
A plan for daily emergency coverage is included on the Monday-Friday on-call schedule. Should an emergency arise and psychiatric coverage is not available for outpatient mental health due to unforeseen circumstances, outpatient mental health staff may call the administrative office at the SPU to obtain the name of the psychiatrist/nurse practitioner on call.

REFERENCES:

Standards for the Administration of Correctional Agencies
Second Edition. Standards

Standards for Adult Correctional Institutions
Fourth Edition Standards

Standards for Adult Community Residential Services
Fourth Edition. Standards

Standards for Adult Probation and Parole Field Services
Third Edition. Standards

Other

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